								MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET		

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. *10750905* FILING DATE *1-I-09*

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT									
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	1						51						
2	1						52						
3	1						53						
4		3/2					54						
5		2					55						
6		1					56						
7		3					57						
8		3/2					58						
9		2					59						
10		3					60						
11		3					61						
12							62						
13							63						
14							64						
15							65						
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38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	20						TOTAL DEP.						
TOTAL CLAIMS	23						TOTAL CLAIMS						